

SEP 3 0 2004

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10755,620
Filing Date	January 12, 2004
First Named Inventor	H. Joshua SCHREFF
Title	Self-contained temperature-...
Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	89287.0003

I hereby appoint:

Practitioners associated with the Customer Number:

OR

Practitioner(s) named below:

Name	Registration Number
Michael L. Crapenhoft	37,115

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number

OR

... The address associated with Customer Number:

OR

Firm or Individual Name: Michael L. Crapenhoft, Attorney at Law

Address: 3352 Bennett Drive

City: Los Angeles State: CA Zip: 90068

Country: USA

Telephone: (323) 878-0229 Fax:

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.77(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature: <i>Michael L. Crapenhoft</i>	Date: 9/20/04
Name: Massimiliano Razzi	Telephone: 310 229 6717
Title and Company: VP <i>89287.0003</i>	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.3 and 1.33. The information is provided to obtain or retain a benefit by the public which is to be (and by the USPTO will be) provided, in accordance with 35 U.S.C. 122, 37 CFR 1.4, or other applicable statute or regulation. Estimated burden: 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. "Time" will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10755,620
Filing Date	January 12, 2004
First Named Inventor	SCHREFF, H. Joshua
Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	89287.0003

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

OR

 I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with Customer Number:

OR

 Firm or Individual Name: Michael L. Crapenhoft Address: 3352 Bennett Drive City: Los Angeles

State: CA

Zip: 90068

 Country: USA Telephone: (323) 878-0229Fax:

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/S8/96)

SIGNATURE of Applicant or Assignee of Record

Signature: *Malin R.*

Name: Massimiliano Rizzi

Date: 9/20/04 Telephone: 310 273 6237

NOTE: 6 signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form should be addressed to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Filing Date	January 12, 2004
First Named Inventor	H. Joshua SCHREIFF
Title	Self-contained temperature- . . .
Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	89287.0003

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OR

Practitioner(s) named below:

Name	Registration Number
Michael L. Crapenhoft	37,115
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

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Fax:

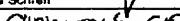
OR

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.71(d) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature:  Date: 9-19-04
Name: H. Joshua Schreiff Telephone: 425-783-9410

Title and Company: 

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 2 forms are submitted.

This section of information is required by 37 CFR 1.31 and 1.32. The information is required to obtain or retain a benefit by the public which is to be had (and by the USPTO) in a patent or application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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SEP 30 2004
U.S. Patent and Trademark Office
PTO/SB/62 (08-04)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10755,620
Filing Date	January 12, 2004
First Named Inventor	SCHREFF, H. Joshua
Art Unit	UNKNOWN
Examiner Name	UNKNOWN
Attorney Docket Number	69287.0003

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number:

OR

Firm or
Individual Name: Michael L. Crapenhoft

Address: 3352 Bennett Drive

City: Los Angeles State: CA Zip: 90068

Country: USA

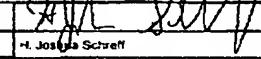
Telephone: (323) 878-0229 Fax:

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature: 

Name: H. Joshua Schreif

Date: 9-29-04

Telephone: 925-785-9410

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 2 forms are submitted.

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